

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000071697

**FILED  
Apr 23, 2018  
Secretary of State  
CC5100062736**

**Entity Name:** SHORELINES DESIGN GROUP, LLC

**Current Principal Place of Business:**

793 SAN CHRISTOPHER DR., SUITE D  
DUNEDIN, FL 34698

**Current Mailing Address:**

793 SAN CHRISTOPHER DR., SUITE D  
DUNEDIN, FL 34698

**FEI Number:** 20-5253695

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BADDERS, GARY L  
793 SAN CHRISTOPHER DR., SUITE D  
DUNEDIN, FL 34698 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name BADDERS, GARY L  
Address 793 SAN CHRISTOPHER DR  
City-State-Zip: DUNEDIN FL 34698

Title MGRM  
Name BADDERS, LORI  
Address 793 SAN CHRISTOPHER DR  
City-State-Zip: DUNEDIN FL 34698

Title MR.  
Name BADDERS, RICHARD L  
Address 793 SAN CHRISTOPHER DR  
City-State-Zip: DUNEDIN FL 34698

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GARY BADDERS

**MGRM**

**04/23/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date